

County: Shawano
 EVERGREEN CARE CENTER
 1250 EVERGREEN ST
 SHAWANO

Facility ID: 3120

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54166 Phone: (715) 526-3107
 Operated from 1/1 To 12/31 Days of Operation: 366
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/04): 65
 Total Licensed Bed Capacity (12/31/04): 65
 Number of Residents on 12/31/04: 55

Ownership: Limited Liability Company
 Highest Level License: Skilled
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 56

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)	
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	%
Home Health Care	No	Developmental Disabilities	0.0	Under 65	10.9	1 - 4 Years	36.4
Supp. Home Care-Personal Care	No	Mental Illness (Org./Psy)	20.0	65 - 74	9.1	More Than 4 Years	21.8
Supp. Home Care-Household Services	No	Mental Illness (Other)	0.0	75 - 84	36.4		100.0
Day Services	No	Alcohol & Other Drug Abuse	0.0	85 - 94	36.4	*****	
Respite Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	7.3	Full-Time Equivalent	
Adult Day Care	No	Cancer	0.0			Nursing Staff per 100 Residents	
Adult Day Health Care	No	Fractures	0.0		100.0	(12/31/04)	
Congregate Meals	No	Cardiovascular	25.5	65 & Over	89.1	-----	
Home Delivered Meals	No	Cerebrovascular	10.9			RNs	10.3
Other Meals	No	Diabetes	16.4	Gender	%	LPNs	9.1
Transportation	No	Respiratory	5.5			Nursing Assistants,	
Referral Service	No	Other Medical Conditions	21.8	Male	25.5	Aides, & Orderlies	
Other Services	No		-----	Female	74.5		
Provide Day Programming for Mentally Ill	No		100.0		-----		
Provide Day Programming for Developmentally Disabled	No				100.0		

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care				
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	0	0.0	0	1	3.0	135	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.8	
Skilled Care	9	100.0	314	29	87.9	116	0	0.0	0	13	100.0	152	0	0.0	0	0	0.0	0	51	92.7	
Intermediate	---	---	---	3	9.1	97	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	5.5	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	9	100.0		33	100.0		0	0.0		13	100.0		0	0.0		0	0.0		55	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	17.0	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	0.0	Bathing	1.8	90.9	7.3	55
Other Nursing Homes	0.0	Dressing	16.4	80.0	3.6	55
Acute Care Hospitals	81.3	Transferring	25.5	74.5	0.0	55
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	27.3	40.0	32.7	55
Rehabilitation Hospitals	0.0	Eating	60.0	29.1	10.9	55
Other Locations	1.8	*****				
Total Number of Admissions	112	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	5.5		Receiving Respiratory Care	0.0
Private Home/No Home Health	46.6	Occ/Freq. Incontinent of Bladder	41.8		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	29.1		Receiving Suctioning	0.0
Other Nursing Homes	0.9				Receiving Ostomy Care	7.3
Acute Care Hospitals	24.1	Mobility			Receiving Tube Feeding	1.8
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	3.6		Receiving Mechanically Altered Diets	21.8
Rehabilitation Hospitals	0.0					
Other Locations	6.0	Skin Care			Other Resident Characteristics	
Deaths	22.4	With Pressure Sores	7.3		Have Advance Directives	100.0
Total Number of Discharges		With Rashes	10.9		Medications	
(Including Deaths)	116				Receiving Psychoactive Drugs	7.3

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	82.2	81.9	1.00	85.5	0.96	85.9	0.96	88.8	0.93
Current Residents from In-County	87.3	72.8	1.20	71.5	1.22	75.1	1.16	77.4	1.13
Admissions from In-County, Still Residing	17.9	18.7	0.96	20.7	0.86	20.5	0.87	19.4	0.92
Admissions/Average Daily Census	200.0	151.4	1.32	125.2	1.60	132.0	1.52	146.5	1.37
Discharges/Average Daily Census	207.1	151.2	1.37	123.1	1.68	131.4	1.58	148.0	1.40
Discharges To Private Residence/Average Daily Census	96.4	74.0	1.30	55.7	1.73	61.0	1.58	66.9	1.44
Residents Receiving Skilled Care	94.5	95.3	0.99	95.8	0.99	95.8	0.99	89.9	1.05
Residents Aged 65 and Older	89.1	94.3	0.95	93.1	0.96	93.2	0.96	87.9	1.01
Title 19 (Medicaid) Funded Residents	60.0	71.9	0.83	69.1	0.87	70.0	0.86	66.1	0.91
Private Pay Funded Residents	23.6	16.7	1.41	20.2	1.17	18.5	1.28	20.6	1.15
Developmentally Disabled Residents	0.0	0.6	0.00	0.5	0.00	0.6	0.00	6.0	0.00
Mentally Ill Residents	20.0	29.5	0.68	38.6	0.52	36.6	0.55	33.6	0.60
General Medical Service Residents	21.8	23.5	0.93	18.9	1.15	19.7	1.11	21.1	1.04
Impaired ADL (Mean)	42.5	46.4	0.92	46.2	0.92	47.6	0.89	49.4	0.86
Psychological Problems	7.3	54.5	0.13	59.0	0.12	57.1	0.13	57.7	0.13
Nursing Care Required (Mean)	6.1	7.4	0.83	7.0	0.88	7.3	0.84	7.4	0.83